RIDE Comprehensive Early Childhood Education Program 2010 Letter of Intent



Prograi	m Name:	
Author	ized Individual:	
	Yes, our program wishes to move forward with the new RIDE Approval Process and will submit a copy of our Self-Assessment, our corresponding Action Plan, and new Application by June 30, 2010.	
	Authorized Signature	Date
	Current Email Address (required)	
0	No, our program does not wish to move forward with the new RIDE Approval Process at this time. Our program will (choose one): remain open under a DCYF License	
	close as of	(date)
	Authorized Signature	 Date
	Programs must return this form to RIDE by Monday, Ma	ay 3, 2010 to:
	Stephanie Enos Preschool Approval Specialist Rhode Island Department of Education 255 Westminster Street, Room 400 Providence, RI 02903	

Programs that choose <u>not</u> to move forward with RIDE Approval are invited to use the back of this form to provide information about their decision. This information will be used to guide RIDE's ongoing efforts to identify barriers and design supports to programs.